

Labor Organization Officer and Employee Report



U.S. Department of Labor

Employment Standards Administration
Office of Labor-Management Standards



This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

Form approved - OMB No. 1215-0188
Expires 07-31-2004

1. Name and address of person filing Jon BLACK 441 Crestview Point Dr Lewisville TX 75067	2. Name and address of labor organization AMFA Local 11 PO Box 543365 Dallas TX 75354
--	--

3. Position in labor organization Sec. / Treasurer	4. Date fiscal year ended Dec 31 2003	5. File number (if assigned) 41945
---	--	---------------------------------------

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name of Employer Southwest Airlines Co.	Address of Employer 2832 Shorecrest Drive Dallas TX 75235
---	--

7. Nature of Interest, Transaction or Income
Own Stock in Southwest Airlines

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name of business Southwest Airlines Co	Address of business Same as above
--	--------------------------------------

9. Business deals with— <input type="checkbox"/> A. Labor Organization <input type="checkbox"/> B. Trust <input checked="" type="checkbox"/> C. Employer	10. If 9B or 9C is checked give trust or employer's name Southwest Airlines
---	--

11. Nature and approximate dollar value of such dealings
I have 180 shares of stock and 2400 shares in a stock option Plan. And a Profitsharing Plan at Southwest Airlines (LUV stock)

12. Nature of interest held or income received
I have not received any income from selling any of the stock
I have



C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13. Name and address of employer <input checked="" type="checkbox"/> or consultant <input type="checkbox"/> Southwest Airlines 2832 Shorecrest Drive Dallas TX 75235	14. Nature of payment I have not received any payment for the stock I own
---	--

IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS

15. Signature and verification—The undersigned declares, under the applicable penalties of the law, that all of the information in this report, including the attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct and complete.

Signed: [Signature] at Dallas TX on 7/26/03
City State Date